

**497 Contribution Report**

Amounts may be rounded to whole dollars.

RECEIVED BY OCT 14 2024 EM  
 LOS ANGELES COUNTY  
 Date Stamp  
 2024 OCT 16 AM 8:  
 PROPOSITION B UNIT  
 OCT 14 2024  
**CALIFORNIA FORM 497**  
 For Official Use Only

<b>NAME OF FILER</b> Gascon for LA District Attorney 2024		<b>Date of This Filing</b> 10/14/2024
<b>AREA CODE/PHONE NUMBER</b> (213) 452-6565	<b>I.D. NUMBER (if applicable)</b> 1457094	<b>Report No.</b> 101424A
<b>STREET ADDRESS</b>		<input type="checkbox"/> <b>Amendment to Report No.</b> (explain below)
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90017
		<b>No. of Pages</b> 1

**1. Contributions Received**

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/13/2024	Aner Iglesias Monrovia, CA 91016-3304	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Developer ET Foods, Inc.	\$1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/11/2024	Sandeep Khanna Calabasas, CA 91302-3670	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Surgeon MEC Eye Specialists	\$1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

Reason for Amendment: \_\_\_\_\_

\*Contributor Codes  
 IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other (e.g., business entity)  
 PTY - Political Party  
 SCC - Small Contributor Committee